

K-120V

(Rev. 7/02)

2002 KANSAS CORPORATE INCOME TAX PAYMENT VOUCHER

FOR OFFICE USE ONLY

<input type="checkbox"/>									
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For the taxable year beginning _____, 2002; ending _____, 20____

Employer's
Identification
Number

<input type="checkbox"/>											
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Corporation Name			
Corporation Address			Name or Address Change <input type="checkbox"/>
City, Town, or Post Office	State	Zip Code	
Name of Contact Person		Phone Number	

Amended
Payment

Extension
Payment

PAYMENT
AMOUNT

\$

<input type="checkbox"/>											
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Make check or money order payable to: Kansas Corporate Income Tax

DO NOT SUBMIT PHOTOCOPIES OF THIS FORM

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